ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			10/28
FORMALITY REVIEW		JC 870	12 06 00
RESPONSE FORMALITY REVIEW		1018	24/06/01

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim	Date		Claim	Date		Claim	Date
Final / Original			Final / Original			Final / Original	
1			51			101	
2			52			102	
3			53			103	
4			54			104	
5			55			105	
6			56			106	
7			57			107	
8			58			108	
9			59			109	
10			60			110	
11			61			111	
12			62			112	
13			63			113	
14			64			114	
15			65			115	
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17			67			117	
18			68			118	
19			69			119	
20			70			120	
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23			73			123	
24			74			124	
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36			86			136	
37			87			137	
38			88			138	
39			89			139	
40			90			140	
41			91			141	
42			92			142	
43			93			143	
44			94			144	
45			95			145	
46			96			146	
47			97			147	
48			98			148	
49			99			149	
50			100			150	

If more than 150 claims or 10 actions
staple additional sheet here

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